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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/775,983-Conf. #1324
	Filing Date	February 10, 2004
	First Named Inventor	Timothy P. Meier
	Art Unit	2876
	Examiner Name	A. Kim
	Attorney Docket Number	283-400.01
Total Number of Pages in This Submission	20	

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	PTOL-85 Part B Fee(s) Transmittal (1 pg.), Amendment to Accompany Payment of Issue Fee (15 pgs.), Comment on Statement of Reasons for Allowance (2 pgs.), Certificate of Express Mail and Return Mail
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MARJAMA MULDOON BLASIAK & SULLIVAN LLP		
Signature	<i>George S. Blasiak</i>		
Printed name	George S. Blasiak		
Date	October 29, 2007	Reg. No.	37,283

Transmittal

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EM047975098US, on the date shown below in an envelope addressed to: MS Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: October 29, 2007

Signature: *Barbara A. Sattman*

Barbara A. Sattman



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Dated: October 29, 2007

Signature:

Barbara A. Saltzman
(Barbara A. Saltzman)

Docket No.: 283-400.01
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Timothy P. Meier et al.

Application No.: 10/775,983

Confirmation No.: 1324

Filed: February 10, 2004

Art Unit: 2876

For: Adaptive Optical Image Reader

Examiner: A. Kim

COMMENT ON STATEMENT OF REASONS FOR ALLOWANCE

MS Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

INTRODUCTORY COMMENTS

Remarks/Arguments begin on page 2 of this paper.

REMARKS

Regarding the Statements of Reasons for Allowance dated December 19, 2006, July 7, 2006, and October 4, 2005, applicants note that the elements listed in the statement do not appear to be present in combination in any allowed claim. If the position of the Examiner is that the listed elements must be present in combination in each claim for each claim to be allowable, the Examiner is respectfully requested to withdraw the allowance and to present a new non-final rejection substantiating such a finding.

Accordingly, in view of the above remarks, applicants believe the present application to be in condition for allowance and respectfully request passage to allowance of the application.

If the Examiner believes that contact with applicants' attorney would be advantageous toward the disposition of this case, the Examiner is herein requested to call applicants' representative at the phone number listed below.

The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to deposit Account No. 50-3577.

Dated: October 29, 2007

Respectfully submitted,

By George S. Blasiak

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